

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Current Age: \_\_\_\_\_

## THE NEED FOR LONG TERM CARE

---

1.

### Age and Gender

The need for long term care increases as you get older. If family members have lived to ages over 85, there is a good chance you may live as long or longer. Living longer increases your chances for needing long term care. If family members have lived to younger ages than 85, advances in medical technology may allow you to live to be over age 85.

Women tend to live longer than men. They are therefore more likely to develop a disabling chronic condition and/or to live alone, which increases their likelihood of needing long term care at some point in their lives.

- a. To what age did your parents live? \_\_\_\_\_
- b. To what age have other family members lived (siblings, grandparents, etc.)? \_\_\_\_\_

2.

### Living Arrangements

For elderly persons living alone, with few friends or family members living close by who could provide assistance, chances of needing nursing home care at some point in their lives are increased. If home health care is considered as an option, the person will usually need someone at their home or nearby, to help them when the home health care aides or nurses are not available.

- a. Do you live alone, with spouse, adult children, friends or relatives, or other? \_\_\_\_\_
- b. Are your adult children or other family and friends available to provide care or you should you need it? Do your children live close by? \_\_\_\_\_
- c. Would your children or other family members be willing and able to provide this care? \_\_\_\_\_



## Health History

3.

The need for long term care usually results from a *disabling chronic condition* (such as diabetes, arthritis, heart condition, stroke, emphysema or other respiratory problems, Alzheimer's, or cancer). These conditions may be related to your family history or to health risk factors you may have (smoking, overweight, high blood pressure). If you currently have a serious chronic health condition, insurance companies may not insure you.

- a. General health condition (excellent, good, fair, poor): \_\_\_\_\_
- b. List medications and purpose: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- c. Major surgeries or illnesses which resulted in hospitalizations in the past 5 years: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- d. Family history of chronic illness (diabetes, heart disease, arthritis, Alzheimer's, Parkinson's disease, cancer, etc.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- e. Do you have any health or life style factors that may put you at risk of needing long term care (smoking, overweight, high blood pressure, mental health problems)? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- f. Are you *currently* unable to perform activities of daily living without help from others? If yes, you probably will *not* be able to purchase a long term care insurance policy. Common activities of daily living are: bathing, dressing, transferring (i.e. moving from bed to chair), toileting, and eating.

If you presently have a chronic disabling condition or  
are unable to perform activities of daily living,  
PLEASE GO TO PAGE 10,  
"OTHER OPTIONS" SECTION.



Your feelings and preferences are important to consider, in determining whether to purchase long term care insurance.

- a. How do you feel about your adult children or others providing financial support for you? \_\_\_\_\_  
\_\_\_\_\_
- b. How do you feel about relying on help from your adult children or others, in order to remain in your home, should you need such help? \_\_\_\_\_
- c. How do feel about living with your adult children or others? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- d. What is your attitude about receiving Medicaid, should you need it? \_\_\_\_\_  
\_\_\_\_\_
- e. How important is it to leave an estate to your children or others? \_\_\_\_\_  
\_\_\_\_\_
- f. Is there a specific nursing home you would like to use, should you need long term care? \_\_\_\_\_
- g. How important is it for you to have a single room should you need nursing home care? The rates for single rooms are higher than the rates for double rooms. Having a LTC policy may help pay towards this cost.  
\_\_\_\_\_  
\_\_\_\_\_
- h. What are your specific concerns or priorities? Why are you looking into long term care insurance now? \_\_\_\_\_  
\_\_\_\_\_
- i. Are you planning to live in another state? \_\_\_\_\_ (If you buy an Indiana Partnership policy, ***it will pay insurance benefits in other states.*** However, should you need care beyond the limits of your Partnership policy, and turn to the Medicaid program, only *Indiana's and Conneticut's Medicaid program* can honor the asset protection earned through your Indiana Partnership long term care policy. This means, at the time of needing Medicaid, you would need to to live in Indiana or Conneticut in order to protect your assets.)